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APPLICANTS Gregory D. Sempowski, Durham, NC; Barton F. Haynes, Durham, NC;				
** CONTINUING DATA ***** This appln claims benefit of 60/414,366 09/30/2002 <i>x2 11/17/06</i>				
** FOREIGN APPLICATIONS ***** <i>None</i> <i>x2 11/17/06</i>				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY ** ** 12/19/2003				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Verified and <i>None</i> Acknowledged <i>x2</i> Examiner's Signature Initials		STATE OR COUNTRY NC	SHEETS DRAWING 5	TOTAL CLAIMS 15
		INDEPENDENT CLAIMS 3		
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TITLE Thymic atrophy				
FILING FEE RECEIVED 450	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	